



**COVER PAGE LISTING DOCUMENTS  
BEING TRANSMITTED VIA FACSIMILE**

2 Pages Via Facsimile: 571-273-2885  
Mail Stop ISSUE FEE  
Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

**Certificate of Transmission**

I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office (fax no. 571-273-2885) on April 28, 2008.

*Morey B. Wildes*  
Morey B. Wildes Reg. No. 36,968

Regarding the following Application:

Applicant(s): GOLDBERG, Michael et al. Examiner: LUKTON, D.

Serial No./ 10/541,433 Group Art Unit: 1654  
Patent No.:

Filed/ July 5, 2005 Attorney Docket No.: P-9859-US  
Issue Date:

Title: NIGHT-TIME ORAL INSULIN THERAPY

**Please find:**

- |  |  |
|--|--|
| 1. <input type="checkbox"/> Provisional Application Cover Sheet                      | 11. <input type="checkbox"/> Response to Notice to File Missing Parts (____ Pages) |
| 2. <input type="checkbox"/> Utility Patent Application Transmittal                   | 12. <input type="checkbox"/> Response to Notice of Incomplete Reply (____ Pages)   |
| 3. <input type="checkbox"/> RCE Transmittal Sheet                                    | 13. <input type="checkbox"/> Request for Correction of Filing Receipt              |
| 4. <input type="checkbox"/> Transmittal Sheet for Entering National Phase            | 14. <input type="checkbox"/> Information Disclosure Statement including:           |
| 5. <input type="checkbox"/> Design Patent Application Transmittal                    | - Form PTO/SB/08 and   |
|  | - references _____   |
| 6. <input type="checkbox"/> Fee Transmittal Sheet                                    | 15. <input type="checkbox"/> Preliminary Amendment (____ Pages)                    |
| 7. <input type="checkbox"/> Utility or Design Patent Application Under 35 USC 111(a) | 16. <input type="checkbox"/> Response to Office Action dated ____ (____ Pages)     |
| <input type="checkbox"/> Provisional Patent Application Under 35 USC 111(b)          | 17. <input type="checkbox"/> Petition for a One Month(s) Extension of Time         |
| <input type="checkbox"/> National Phase Patent Application Under 35 USC 371          | 18. <input type="checkbox"/> Terminal Disclaimer                                   |
| Containing:  | 19. <input type="checkbox"/> Notice of Appeal                                      |
| ____ Pages of Specification  | 20. <input type="checkbox"/> Appeal Brief (____ Pages)                             |
| ____ Pages of Claims   | 21. <input checked="" type="checkbox"/> Issue/ Publication Fee Transmittal         |
| ____ Page of Abstract  | 22. <input type="checkbox"/> Submission of Formal Drawings: Two sets of            |
| ____ Pages of Formal Drawings  | ____ Sheets containing Figs. _____   |
| ____ Pages of _____  | 23. <input type="checkbox"/> Certified copy of Priority Doc.                       |
| 8. <input type="checkbox"/> Signed Declaration & Power of Attorney (____ Pages)      | 24. <input type="checkbox"/> Claim for Convention Priority                         |
| 9. <input type="checkbox"/> Request for Correction of Recordation of Assign. and:    | 25. <input type="checkbox"/> Revocation and Power of Attorney, including:          |
| - Recordation Cover Sheet  | - Statement Under 37 CFR 3.73(b)   |
| - Copy of Notice of Recordation of Assignment  | - Copy of Assignment   |
| 10. <input type="checkbox"/> Recordation of Assign. Cover Sheet & Signed Assign.     | 26. <input type="checkbox"/> Other: (____ Pages)                                   |

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to:

Mail

Mail Stop ISSUE FEE  
Commissioner for Patents  
PO Box 1450  
Alexandria, Virginia 22313-1450  
(571) 273-2885

or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

49443 7590 04/04/2008

PEARL COHEN ZEDEK LATZER, LLP  
1500 BROADWAY, 12TH FLOOR  
NEW YORK, NY 10036

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Morey R. Wildes

April 28, 2008

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/541,433	02/16/2006	GOLDBERG, Michael	P-9859-US	9801

TITLE OF INVENTION: NIGHT- TIME ORAL INSULIN THERAPY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1,440	\$300	\$0	\$1,740	07/07/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
LUKTON, D.	1654	514-003000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list  
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (have as a member a registered attorney or agent) and the names of up to two registered patent attorneys or agents. If no name is listed, no name will be printed.

1 PEARL COHEN ZEDEK  
2 LATZER, LLP  
3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Emisphere Technologies, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Cedar Knolls, NJ

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☐ Advance Order - # of Copies \_\_\_\_\_

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment to Deposit Account Number 50-3355 (enclose an extra copy of this form)

5. The following fees are enclosed:

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27 ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(e)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature:

Date: April 28, 2008

Typed or printed name: Morey R. Wildes

Registration Number: 36,968

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering preparing, and submitting the completed application form to the USPTO. Time will vary depending on the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETE/D FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTOL-85 (Rev. 07/06) Approved for use through 04/30/2007.

OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

04/28/2008 NGUYEN2 00000165 503355 10541433

01 FC:1501 1440.00 DA  
02 FC:1504 300.00 DA